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APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR	3.	ATTORNEY DOCKET NO.	CONFRMATION NO.	
10/550,622 08/03/2006		***************************************	Katya Ivanova	······································	33715(C)	4634	
TITLE OF INVENTION. 3	HAIR TREATMENT	COMPOSITIONS					
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Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached  "Few Address" indication (sr "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			ox agents OR, alternat (2) the name of a sing	f a single firm (having as a member a 2 mey or speat) and the names of up to tent attorneys or agents. If no nume is 3			
3. ASSIGNEE NAME AND PLEASE NOTE: Unles recordation as set forth i (A) NAME OF ASSIGN	is an assignee is ident in 37 CFR 3.11. Comp VEE	fied below, no assigme detion of this form is NO		pationt. If an assigner cassignment. Y and STATE OR CC		ocument has been liked for	
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	ic assigner category or	categories (will not be pr	inted on the patent):	Individual 🗓 Cor	poration or other private gr	up entity 🏻 Government	
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Please check the appropriat  4a. The following fee(s) as  Issue Fee  Publication Fee (No Advance Order - # o  5. Change in Entity Status  a. Applicant claims 5	e submitted; smail entity discount p f Copies v (from status indicates SMALL EXFITY statu	ermitted)  I above)  S. Seg 37 CFR 1-27.	Payment of Fee(s): (Ple A check is enclosed, Payment by credit ca The Director is hereb overpayment, to Dep	ase first reapply and rd. Form PTO-2038 i y authorized to charg out Account Number	previously paid issue fee set attached.  the required fee(s), any de 12-1155 (enclose a.	shown above)  ficiency, or credit any nextra copy of this form).  R 1.27(g)(2).	
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